			Donar	tment of P	n la li	, U	nith n	nd 6.	alal C	and an						
			Depai	Division	of E	s ne nvir	onme	ntal k	Jealth	ervices						
							nvironmental Health ient Inspection Report Page 1 of 2									
INSPECTION RSN TYPE GRADE INSPECTION DATE					ESTABLISHMENT NAME											
Regular	X															
Follow-up		\vdash 0	TIME IN TIME OUT PERMIT HOLDER									A 1				
	V/	RATING	11:15 AM		Λ	DAVIGS MADER										
Complaint	X	POATING		1	1	PAY LESS MARKETS, INC. LOCATION (Address) L 402 - 9-2 # 137 PEPRO LG ROBE DR OTTE										
Investigation	_	A SANITARY PERMIT NO.					DR RIES SANTA RITA CTUAM									
Other:		8.3	12000			PI	· F-1	12	- >AN	ITA KITA, GTUAM						
		MENT TYPE	AREA	TELEPHO	NE	No.	of Risk	Factor/	intervent	tion Violations O RIS	K CATE	GORY				
1000 ESPA		MENT PETAIL	8							Intervention Violations	2					
	FC	OODBORNE	ILLNESS R	ISK FAC	TO	RS	AND	PUE	ILIC I	HEALTH INTERVENTIONS						
										appropriate box for COS and/or R						
IN = In com	pliance	OUT = Not in complia	ance N/O = Not obse	rved N/A = No	t applic	cable	COS =	Correcte	d on-site		= Demerit	t points				
Compliance	e Status			cos	R	PTS	Con	npliand	e Statu	S DA	COS F	RPT				
			ervision					100		ptentially Hazardous Food (TCS Food)						
1 W OUT	F	MANUAL TO THE PARTY OF THE PART	present, demonstrate	es .		6	16	IN OU	NA D	Proper cooking time and temperatures	Ç 200 100	6				
		knowledge, and p	yee Health							O Proper reheating procedures for hot holding	_	6				
2 (b) out	r		areness, policy preser			6				O Proper cooling time and temperatures O Proper hot holding temperatures		6				
3 W OUT			corting, restriction & ex		\vdash	6		NO OU		Proper cold holding temperatures		6				
100			enic Practices		_					O Proper date marking and disposition		6				
4 6 out	N/A N	Proper enting to	sting, drinking, betelnu	rt, or								10				
4 2 001	N/A N	tobacco use	- 4			6				Consumer Advisory						
5 W OUT	N/A N		n eyes, nose, and mo			6				Consumer Advisory provided for raw or						
- 10			tamination by Han	ds			22	NO OU	Γ N/A	undercooked foods		6				
6 (b) OUT	N/A N	O Hands clean and			\sqcup	6										
7 🚱 оит	N/A N/	U	ntact with ready-to-eat			6	10000			Highly Susceptible Populations		400				
	722		te method properly fol ashing facilities suppli		\vdash		23	IN OUT	T (PA)	Pasteurized foods used; prohibited foods not offered		6				
8 M OUT		accessible				6	1000			Chemical						
		The second secon	ed Source	100		100		Т	_			T				
9 () OUT		Food obtained fro	m approved source			6	24	ואס טוו	L MAN	Food additives: approved and properly used	31	6				
10 IN OUT		Food received at	proper temperature			6	25	Ø our	P 177	Toxic substances properly identified, stored,		1				
11 🗗 OUT			dition, safe, and unad			6	25	W 001	13.70	used		6				
12 IN OUT	N/A M		available: shellstock	tags,		6		1000	Co	nformance with Approved Procedures	4	CONTRACTOR OF THE PARTY OF THE				
		parasite destructi	on vm Contamination			_	26	IN OUT	A STATE OF THE STA	Compliance with variance, specialized		6				
13 6 OUT	N/A	Food separated a	And in case of the last of the			6				process, and HACCP plan						
14 W OUT	and the same of th		aces: cleaned & sanit	ized	-	6		1		re improper practices or procedures identified as						
15 (1) OUT		Proper disposition	of returned, previous	ily		6				ibuting factors of foodbome illness or injury Put ire control measures to prevent foodbome illness						
15 00		served, recondition	ned, and unsafe food							ile como measures to prevent toodbome lintess	or injury.					
	S			GOOD	RET	AIL	. PR/	ACTI	CES							
										emicals, and physical objects into foods.						
Compliance	Status	ii numpered item is n	ot in compliance and/		R	PTS	=Correct		ite during e Status	inspection R = Repeat violation PTS = Der	COS R					
- Indiana	, 600100	AND DESCRIPTION OF THE PARTY OF	d and Water	1000	1	- 10	Con	phanc	o Status	Proper Use of Utensils	DOS N	I PIG				
27 F	asteurize	ed eggs used where r				1	40	l li	1-use uter	nsils: properly stored		11				
		lice from approved s				_	41			quipment and linens: properly stored, dried,		_				
	valer ark	rice irom approved s	ource			2	41	h	andled			1				
29 Variance obtained for specialized processing methods				3			42	Single-use/single-service articles: properly stored, used								
			erature Control				43	G	loves use	ed property		1				
34.1			adequate equipment f	or		1	_	I In	1000	Utensils, Equipment and Vending						
					-	7	44			d and nonfood-contact surfaces cleanable, properly gned, constructed, and used						
					-	_	45			ing facilities: installed, maintained, used; test		1				
2		thawing methods use				1	45		trips			1				
33 T	hermom	eter provided and acc				1	46	N	onfood-co	ontact surfaces clean		1				
24			entification							Physical Facilities	N. W. W. W.					
34 F	ooa prop	erly labeled; original of				1	47			water available, adequate pressure	_	2				
Prevention of Food Contamination 35 Insects, rodents, and animals not present				n I		2	48			nstalled; proper backflow devices	\rightarrow	2				
Contemination provided during food accounting story of				-	2	49			nd wastewater properly disposed	-	2					
36 display					1	1	50	Į ĮT	oilet facili	ties: property constructed, supplied, & cleaned		2				
37 Personal cleanliness					1	51	G	arbage/re	sfuse properly disposed; facilities maintained		2					
38 Wiping cloths: properly used and stored						1	52	2 Physical facilities installed, maintained, and clean								
Washing fruits and vegetables I have read and understand the above violation(s), and						1	53	A	dequate v	ventilation and lighting; designated areas use		1				
				* **						Documents and Placards						
			measures that s	hall be take	n.		54	S		ermit, Health Certificates valid and posted		2				
Person in Charge (Print and Sign)									D	ate: 5/3/18-						
DEH (Inspector (Print and Sign)							71 71					ate				
- Garcia EPHOI / C.TAKAJE EPI							10	2	F	ollow-up (Circle one): YES						
Rev:	08.27.15			White: DPHSS	/DEH	Yelk	ow: Food	Establis	hment							
			J													

Depa	rtment of Publ Division of	ic Heal	Ith and Soci	al Services				
Food	Establish				ort	Page 2	of 2	
ESTABLISHMENT NAME	Lotubilari	LOCAT	ION (Address)	1-400-0	2 #137 PED	raye	001	
PAYLESS SUPERMARKETS - SUM	AV AGAT	De	RIES	CALITA	RITA, GTU	KD LET	KUBI2F1E	
INSPECTION DATE SANITARY PER	MIT NO.	PERMI	T HOLDER	SHNIA	INITAL CIVI	4 11		
5 13 12018 170001	915	PAYLESS MARKETS, INC.						
	EMPERATU							
Item/Location	Temperature	(° F)		Item/Locat	ion	Tempe	erature (° F)	
RAW TUNA / AISLE CHILLER	42	0	BEEF	/ WAIL I	N CHILLER	3/,		
TANIGUE FISH! AISLE CHILLE	R 42,							
HOTDOGI COFFIN CHILLER	36							
CHICKEN LONGANISA/ COFFIN	CHUER 27.							
GROUND REEF / AISLE CHILLER	36.							
CHUCK STEAK AISLE CHILLER	38.							
PORK FEET / AISLE CHILLER	41.					 -		
CHICKEN THIGH! AISLE CHILLE								
CHICKEN TEG/AISLE CHILLE EGG /AISLE CHILLER	R 39,					-		
							CORRECT	
ITEM NO. OBSER	VATIONS AN	ND CC	DRRECTIV	E ACTION	IS		BY DATE	
Violations cited in this report must be co	rrected within 8-406.11 of the				as stated in Sec	tions 8-4	05.11 and	
A PEGUAL LAISPECTION					A CO. 101 01	1.1-		
A REGULAR INSPECTION	VAS LUK	DVCI	EU DAS	EU ON	A CUMPLAI	N		
C#18-011) REGARDIN						PERATU	RE	
NO EVIDENCE TO SUI	PORT THE	COM	PLAINT	WAS O	BSELVED			
DURING THE TIME	•					ממ		
WAS CONDUCTED.	<u> </u>		77.	de Control N	110-110	//-		
MAS CONDUCTED.								
000								
PREVIOUS INSPECTION	I CONDUCT	ED	ON 7/	13/2015	(6/A).			
All VIOLATIONS WER	E CORRE	CTE	D					
	19							
Un WINATING	00 00 00	0.50		- .				
NO VIOLATIONS WE	re obsel	VED						
				·.				
PHOTOS TAKEN						,		
				· ••	· - · · · · · · · · · · · · · ·			
A" PLACARD REM	OVEO (A)	121						
SAL DIA AND TERM	- (006	7-1						
A" PLACARD ISSUE	ED (026	+5)						
PIC BRIEFED ON	THE A	RIVE			, 1			
								
Sased on the inspection today, the items listed above identi	y violations which sh	all be co	rrected by the dat	a specified by th	e Department. Failure	to comply m	ay result in	
he immediate suspension of the Sanitary Permit or downgri submitted to the Director within the period of time establish	ide. If seeking to app ad in the notice for co	rrections	ssuπ of any notice 	or inspection fi	naings, a written reque	st for hearin	g must be	
Person in Charge (Print and Sign)	/				Date	-1211	0	
DEH Inspector (Print and Sign)						11211	8	
Y Garcia Ephol	6.7	4 1-18	E EPHOI	6	Date:	12 12-	2	
	White: DPHSS/DEH		r. Food Establish	·		- , - 0		
J								